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PATENT
Attorney Docket No. AMI-004


2176
\$

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Gropper et al.
SERIAL NO.: 09/304,204 GROUP NO.: 2176
FILING DATE: May 3, 1999 EXAMINER: Huynh, Cong Lac T
TITLE: Method And Structure For Electronically Transmitting A Text
Document And Linked Information

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 19th day of September, 2003.


Susan Boucher

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Submitted herewith is/are: Transmittal Form (1 page); Fee Transmittal (1 page); check in the amount of \$180.00; Supplemental Information Disclosure Statement (2 pages); Form PTO-1449 (3 pages); Copies of cited references (A13-A62, B1-B2 and C1-C3); and a return receipt postcard.

2683934_1



TRANSMITTAL FORM

Application Serial Number	09/304,204
Filing Date	May 3, 1999
First Named Inventor	Gropper
Group Art Unit	2176
Examiner Name	Huynh, Cong Lac T.
Attorney Docket No.	AMI-004
Patent No.	Not applicable
Issue Date	Not applicable

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ENCLOSURES (check all that apply)

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Check Attached
<input type="checkbox"/> Copy of Fee Transmittal Form

<input type="checkbox"/> Amendment/Response
<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]

<input type="checkbox"/> Petition for Extension of Time

<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement
<input checked="" type="checkbox"/> Form PTO-1449
<input checked="" type="checkbox"/> Copies of SIDS Citations

<input type="checkbox"/> Certified Copy of Priority Document(s)

<input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
<input type="checkbox"/> Computer Readable Copy
<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)

<input type="checkbox"/> Formal Drawing(s)

<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal

<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)

<input type="checkbox"/> Terminal Disclaimer

<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application

<input type="checkbox"/> Small Entity Statement

<input type="checkbox"/> CD(s) for large table or computer program

<input type="checkbox"/> Amendment After Allowance

<input type="checkbox"/> Request for Certificate of Correction
<input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences

<input type="checkbox"/> Appeal Brief (in triplicate)

<input type="checkbox"/> Status Inquiry

<input checked="" type="checkbox"/> Return Receipt Postcard
<input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8


<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8

<input type="checkbox"/> Additional Enclosure(s) (please identify below) |
|--|--|---|

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SIGNATURE BLOCK

Respectfully submitted,

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Date: September 9, 2003
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FEE TRANSMITTAL SEP 26 2003 FY 2003	Complete if Known	
	Application Serial Number	09/304,204
	Filing Date	May 3, 1999
	First Named Inventor	Gropper
	Group Art Unit	2176
	Examiner Name	Huynh, Cong Lac T.
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METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																									
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other 2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit. 3. <input type="checkbox"/> Applicant claims small entity status.	3. ADDITIONAL FEES <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Large Entity Fee (\$)</th> <th style="width: 15%;">Small Entity Fee (\$)</th> <th style="width: 50%;">Fee Description</th> <th style="width: 20%;">Fee Paid</th> </tr> <tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr> <tr><td>110</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>410</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>930</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1450</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1970</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>320</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>320</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>280</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td>180.00</td></tr> <tr><td>750</td><td>375</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>750</td><td>375</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td></td></tr> <tr><td>110</td><td>55</td><td>Submission of Terminal Disclaimer</td><td></td></tr> <tr><td colspan="3">Other fee (Specify) _____</td><td></td></tr> <tr><td colspan="3">Other fee (Specify) _____</td><td></td></tr> </table>	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		410	205	Extension for reply within second month		930	465	Extension for reply within third month		1450	725	Extension for reply within fourth month		1970	985	Extension for reply within fifth month		320	160	Notice of Appeal		320	160	Filing a brief in support of an appeal		280	140	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement	180.00	750	375	Filing a submission after final rejection (37 CFR 1.129(a))		750	375	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		110	55	Submission of Terminal Disclaimer		Other fee (Specify) _____				Other fee (Specify) _____								
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CORRESPONDENCE ADDRESS Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100	SIGNATURE BLOCK Respectfully submitted, Date: September 19, 2003 Reg. No.: 54,130 Tel. No.: (617) 310-8619 Fax No.: (617) 248-7100 Edward A. Gordon Attorney for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110																																																																																									